

**UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF CALIFORNIA**

In re
Matthew Hollis Reveile
Hannah Elizabeth Reveile

Case No. 2015-28617

Debtor(s).

AMENDMENT COVER SHEET

Amendment(s) to the following petition, list(s), schedule(s), or statement(s) are attached hereto:

- | | |
|--|--|
| <input type="checkbox"/> Petition | <input type="checkbox"/> Statement of Your Financial Affairs |
| <input type="checkbox"/> Creditor Matrix | <input type="checkbox"/> Statement of Intention for Individuals Filing Under Ch. 7 |
| <input type="checkbox"/> List of 20 Largest Unsecured Creditors | <input type="checkbox"/> List of Equity Security Holders |
| <input checked="" type="checkbox"/> Schedules (check appropriate boxes). See Instruction #4 below. | |

☐ A/B ☐ C ☐ D ☐ E/F ☐ G ☐ H ☒ I ☒ J

- ☐ Summary of Schedules of Assets and Liabilities

REQUIRED IF AMENDING SCHEDULE(S) A/B, D, E/F, I, OR J.

Purpose of amendment (check one):

- ☐ To add pre-petition creditors, delete creditors, change amounts owed or classification of debt (\$30.00 fee required, provided the bankruptcy judge may, for good cause, waive the charge in any case.) **NOTE:** Lists, schedules and statements that add or change creditors must be accompanied by an amended matrix listing only the creditors added or changed.
- ☒ No pre-petition creditors were added, creditors deleted, or amounts owed or classifications of debt changed.

NOTICE OF AMENDMENT TO AFFECTED PARTIES

Pursuant to Federal Rule of Bankruptcy Procedure 1009(a), I certify that notice of the filing of the amendment(s) checked above has been given this date to the Trustee in this case, and to any and all entities affected by the amendment, together with a copy of the notice of meeting of creditors, the discharge (if one has been entered), a subsequent notice to file claims (if one has been issued), and any other document affecting the rights of the added creditors. (NOTE: Proof of service, indicating that service has been made, must be filed with the Court.)

Dated: **October 3, 2016**

Attorney's [or Pro Se Debtor's] Signature: /s/ Eric J. Schwab

Printed Name:

Eric J. Schwab 145600

Mailing Address:

ATTORNEY AT LAW

555 University Avenue, Suite 130
Sacramento, CA 95825

DECLARATION BY DEBTOR

I(We), the undersigned debtor(s), hereby declare under penalty of perjury that the information set forth in the amendment(s) attached hereto, consisting of ___ pages, is true and correct.

Dated: **October 3, 2016**

/s/ Matthew Hollis Reveile

Matthew Hollis Reveile

Debtor's Signature

Dated: **October 3, 2016**

/s/ Hannah Elizabeth Reveile

Hannah Elizabeth Reveile

Joint Debtor's Signature

INSTRUCTIONS

1. Use this cover sheet **ONLY** when filing amended petitions, lists, schedules and statements. **Do not use an amendment cover sheet when submitting amended plans or amendments to plans.**
2. Include the word "Amended" in the title of each amended document.
3. Amendments to property schedules (A/ B), creditor schedules (D and E/ F), or income/expenses schedules (I and J) must be accompanied by an amended Summary of Schedules of Assets and Liabilities. Updates to the schedule totals will not be made unless the summary is filed.
4. Amendments to add creditors or change their names/addresses must consist of the amended schedule(s) with a notation to the right of the creditor entry of "A" if the creditor is being added or "C" if it is being changed. **Failure to include "A" or "C" notations on amended schedules may result in duplicate or multiple listings on master address lists.**
5. Amendments which add or change creditors must be accompanied by a separately filed amended matrix containing **ONLY** the additions/changes so that the creditors may be downloaded into the case. The matrix should not contain the "A" or "C" notations.
6. When e-Filing an amended matrix, you must submit two separate files: a PDF file containing the amendment cover sheet for the matrix, and a text file containing the creditors in the standard master address list format. These two files must be uploaded together.
7. Federal Rule of Bankruptcy Procedure 1009 requires the debtor to give notice of an amendment to the trustee and to any entity affected thereby. **Notice of the amendment will not be given by the Clerk's Office.** To comply with this requirement, the debtor's attorney or Pro Se debtor must give notice to the trustee and any entity affected by the amendment by serving all previous court notices including, but not limited to, the notice of meeting of creditors, discharge of debtor, etc. A proof of service, indicating that service has been made, must be filed with the court.
8. Checks and money orders should be payable to "Clerk, U.S. Bankruptcy Court." **(NOTE: No personal checks will be accepted.)**

EDC 2-015 (Rev. 12/1/15)

B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court
Eastern District of California

In re **Matthew Hollis Reveile,**
Hannah Elizabeth Reveile

Debtors

Case No. **2015-28617**Chapter **13**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	8,213.74		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		4,710.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	10		154,696.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			3,268.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,938.00
Total Number of Sheets of ALL Schedules		23			
Total Assets			8,213.74		
Total Liabilities				159,406.00	

B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court
Eastern District of California

In re **Matthew Hollis Reveile,
Hannah Elizabeth Reveile**

Debtors

Case No. 2015-28617Chapter 13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

- ☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	117,844.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	117,844.00

State the following:

Average Income (from Schedule I, Line 12)	3,268.00
Average Expenses (from Schedule J, Line 22)	2,938.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	4,213.01

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		154,696.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		154,696.00

Fill in this information to identify your case:

Debtor 1 Matthew Hollis Reveile

Debtor 2 Hannah Elizabeth Reveile
(Spouse, if filing)

United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA

Case number 2015-28617
(If known)

Check if this is:

- ☐ An amended filing
- ☒ A supplement showing post-petition chapter 13 income as of the following date:

10/01/2016

MM / DD / YYYY

Official Form B 6I

Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

How long employed there?

Debtor 1

- ☒ Employed
- ☐ Not employed

Graphic DesignerDome PrintingSacramento, CA 958151.5 years

Debtor 2 or non-filing spouse

- ☒ Employed
- ☐ Not employed

BaristaCafe SantoroCameron Park, CA 956823 months

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>3,040.00</u>	\$ <u>960.00</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>3,040.00</u>	\$ <u>960.00</u>

Debtor 1 **Matthew Hollis Reveile**
 Debtor 2 **Hannah Elizabeth Reveile**

Case number (if known) **2015-28617**

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 3,040.00	\$ 960.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 557.00	\$ 64.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 111.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify:	5h. + \$ 0.00	+ \$ 0.00
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ 668.00	\$ 64.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 2,372.00	\$ 896.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 0.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify:	8h. + \$ 0.00	+ \$ 0.00
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ 0.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 2,372.00 + \$ 896.00	= \$ 3,268.00
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:	11. +\$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies	12. \$ 3,268.00	Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain:		

Fill in this information to identify your case:

Debtor 1 Matthew Hollis Reveile

Debtor 2 Hannah Elizabeth Reveile
(Spouse, if filing)

United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA

Case number 2015-28617
(If known)

Check if this is:

- ☐ An amended filing
- ☒ A supplement showing post-petition chapter 13 expenses as of the following date:
10/01/2016
MM / DD / YYYY
- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

Schedule J: Your Expenses

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☐ No. Go to line 2.☒ Yes. Does Debtor 2 live in a separate household?☒ No☐ Yes. Debtor 2 must file a separate Schedule J.2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

☒ Yes.

Fill out this information for each dependent.....

Do not state the dependents' names.

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Son

1 Year

☐ No☒ Yes

Daughter

5

☐ No☒ Yes☐ No☐ Yes☐ No☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 1,395.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 0.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **Matthew Hollis Reveile**
 Debtor 2 **Hannah Elizabeth Reveile**

Case number (if known) **2015-28617**

6. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ 110.00
6b. Water, sewer, garbage collection	6b. \$ 0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 200.00
6d. Other. Specify: _____	6d. \$ 0.00
7. Food and housekeeping supplies	7. \$ 600.00
8. Childcare and children's education costs	8. \$ 68.00
9. Clothing, laundry, and dry cleaning	9. \$ 30.00
10. Personal care products and services	10. \$ 30.00
11. Medical and dental expenses	11. \$ 150.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ 150.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ 30.00
14. Charitable contributions and religious donations	14. \$ 0.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ 0.00
15b. Health insurance	15b. \$ 20.00
15c. Vehicle insurance	15c. \$ 155.00
15d. Other insurance. Specify: _____	15d. \$ 0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ 0.00
17. Installment or lease payments:	
17a. Car payments for Vehicle 1	17a. \$ 0.00
17b. Car payments for Vehicle 2	17b. \$ 0.00
17c. Other. Specify: _____	17c. \$ 0.00
17d. Other. Specify: _____	17d. \$ 0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).	18. \$ 0.00
19. Other payments you make to support others who do not live with you. Specify: _____	19. \$ 0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. \$ 0.00
20b. Real estate taxes	20b. \$ 0.00
20c. Property, homeowner's, or renter's insurance	20c. \$ 0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$ 0.00
20e. Homeowner's association or condominium dues	20e. \$ 0.00
21. Other: Specify: _____	21. +\$ 0.00
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22. \$ 2,938.00
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ 3,268.00
23b. Copy your monthly expenses from line 22 above.	23b. -\$ 2,938.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$ 330.00
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?	
<input checked="" type="checkbox"/> No.	
<input type="checkbox"/> Yes.	
Explain: _____	